13 Enter a SAR – Inpatient Hospital

Introduction to Enter a SAR – Inpatient Hospital

This section will describe how to enter a SAR that has an inpatient hospital as the service provider.

When entering a SAR with an inpatient hospital as the service provider, the user will specify the "Number of Days," but will not associate service codes for this SAR. The SAR will have the client's name, the inpatient hospital, service date information, and the number of days.

Additional SARs should be authorized for the admitting physician to cover the services that are not included in the Inpatient Hospital SAR. Examples would include surgical procedures and referrals to other physicians.

Objectives

At the completion of this section, you will be able to execute the following functions in CMS Net Web:

- Research Level of Service for an Inpatient Hospital in CMS Net Web
- Enter a SAR with the Inpatient Hospital as the Service Provider
- Specify the Number of Days on the SAR.

13.1 Research the Provider

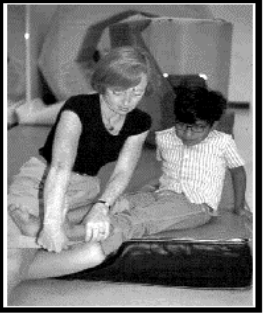1. Access Provider Management by clicking the "Provider" link.

2. Search for the desired service provider (inpatient hospital).

An example of hospital search criteria.

Click the Search Category radio button "Hospital/ Medical Provider"

Enter hospital name (partial search)

Select County

Click "Search"

3. Select from the list of hospitals by clicking on the blue underlined name (link).

4. Confirm that the hospital is an inpatient hospital.
5. Click the "Hospital" tab.

Authorization | Provider | Formulary | Procedure Code | Administration | Reports
HSP30686F - KAISER FOUNDATION HOSP

| Provider | SCC Association | PSU Mgmt | Paneling | Hospital |

Details

Provider Name:	KAISER FOUNDATION HOSP	Provider ID:	HSP30686F		
Provider Type:	COMMUNITY INPATIENT HOSPITAL				
Phone Number:	(714) 785-4600 **Ext:**	County:	Riverside		
Date Added:	11/17/1989	Application Date:	11/17/1989	Last PMF Activity:	09/22/2003
SSN:		FEI No:		Medicare No:	050686
License:		License Date:			
Reject Reason:					
Indicators:	☐ Group ☐ Short Doyle				
	Laboratory:				
	Out of State: In State				
Service Address:	10800 MAGNOLIA AVE	Pay Address:	FILE 54602		
	RIVERSIDE, CA 92505-3000		LOS ANGELES, CA 90074-4602		

Status Information

Status	Effective Date
Active	09/28/1989
Pending	11/17/1989
Pending	11/17/1989
Pending	11/17/1989
Pending	11/17/1989

Category of Service

Code	Start Date	End Date
002	09/28/1989	

Confirm that the provider is Inpatient Hospital.

Note the Provider ID for quick reference later.

6. View Length of Stay.

California Home   CDHS Home   CDHS Comments   CDHS Search   CDHS Organization   Wednesday, April 21, 2004

Children's Medical Services
   Caring for Children with Special Medical Needs...   Contact Us | Help | Logout

Authorization | Provider | Formulary | Procedure Code | Administration | Reports
HSP30686F KAISER FOUNDATION HOSP

| Provider | SCC Association | PSU Mgmt | Paneling | Hospital |

Hospital Level Type (New)	Select
Hospital Level Type (Old)	Standard
Length of Stay:	21 days
Approval Start Date	Jan 1 1965
Approval End Date	Mon Day Year

| Last Update Date: | 04/21/2004 | Last Update By: |

View Length of Stay (in this case it is 21 days).

> Whatever is listed in the "Length of Stay" field will set an upper limit to the "Number of Days" for SARS associated to that inpatient hospital. It applies to extensions (the authorization + extension) as well.

13.2 Enter the SAR – Find the Client

1. Access Service Authorization Request by clicking the "Authorization" link.

2. Enter client search information.
3. Click the "Search" button.

Authorization | Provider | Formulary | Procedure Code | Administration | Reports
Search - Service Authorization

An example of searching for the client by CCS #.

BY CLIENT

CCS Number	2463624	Client Name	
Date of Birth	Mon ▾ Day ▾ Year ▾	Gender	Select ▾
Client Index Number		Legal County	Select ▾
SSN			

BY PROVIDER

○ Hospital / Medical Provider ○ Special Care Centers ○ Dental Provider

			find ▸
Provider Name		Provider ID	find ▸
Service Begin Date	Mon ▾ Day ▾ Year ▾	Service End Date	Mon ▾ Day ▾ Year ▾
SAR Status	Select ▾		

BY SAR NUMBER

SAR Number

Step 9 ➡ **Search** **Clear**
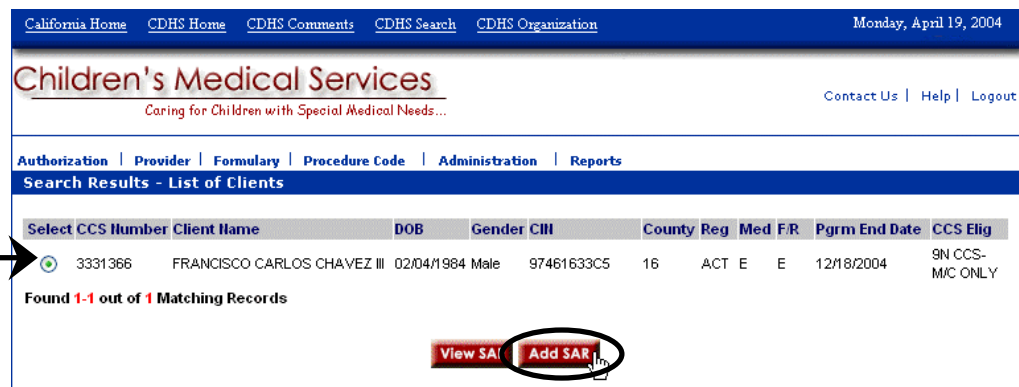
This search is similar to the one performed in CMS Net (character-based system).

Field descriptions are provided in CMS Net Web Online Help.

4. Click the "Select" radio button for the desired client.   If an <u>exact match</u> is found, the option button will be pre-selected.
5. Then click the "Add SAR" button.

If the client is not listed, click the "Authorization" link located above the blue banner to return to the Search SAR page.

Field descriptions are provided in CMS Net Web Online Help.

13.3 Select a Provider for the SAR

This example will demonstrate how to select an inpatient hospital for a SAR.

1. Click the "Hospital/Medical Provider" radio button.
2. Enter provider search information.
3. Click the "Search" button.

You may search for the provider by Provider ID.

Provider ID for a hospital is 9 characters.

You may also find hospitals by using the Provider Name & County fields:

- Prov Name = Kaiser
- County = Riverside

Field descriptions are provided in CMS Net Web Online Help.

4. Click on the link (blue underlined name of your selection).

Field descriptions are provided in CMS Net Web Online Help.

13.4 Enter SAR Information

1. Enter SAR Information.
   - Make sure that the "Number of Days" has been entered. Be sure to include the <u>discharge day</u> in your "Number of Days".
   - Do not add Service Codes to this SAR.
2. Click the "Submit" button to submit for validation.

For this example the SAR allows for a hospital stay that may occur within a 3 month time frame (Jul – Sep). But the client is authorized to stay in the hospital for 10 days.

Authorization | Provider | Formulary | Procedure Code | Administration | Reports

Enter SAR

FRANCISCO CARLOS CHAVEZ III, 3331366

Required fields are marked in *

CLIENT INFORMATION

Client Name:	FRANCISCO CARLOS CHAVEZ III	F/R Elig:	ELIGIBLE	Reg Status:	ACTIVE
CCS Number:	3331366	Med Elig Status:	ELIGIBLE	Application Status:	SIGNED APP
Date of Birth:	02/04/1984	Diagnostic Only:	NO	PSA Status:	SIGNED
CIN:	97461633C5	CCS Elig Status:	9N CCS-M/C ONLY	Program Begin Date:	12/18/2002
Gender:	MALE	County:	KINGS	Program End Date:	12/18/2004

The client header always shows the client's "current" information.

PROVIDER INFORMATION

Provider Name:	KAISER FOUNDATION HOSP	Provider Number:	HSP30686F
Address:	10800 MAGNOLIA AVE,RIVERSIDE,CA,92505-3000	County:	Riverside

CMS Net Web does not allow users to enter a SAR that has a service begin date before 7/1/2004.

SAR INFORMATION

SAR Number   SAR Status

Service Begin Date * [Jul] [1] [2004]   Service End Date [Sep] [1] [2004]

Service Request Date * [Jun] [3] [2004]   Number of Days [10]

EPSDT-SS ☐   Category [Select]

CCS SS ☐   State Approved ○ Yes ○ No

State Funded ☐

Primary Diagnosis* [745.4 VENTRICULAR SEPTAL DEFECT] [find ▸]

Secondary Diagnosis [ ] [find ▸]

The Number of Days that the user keys in must be equal to or less than the Length of Stay on the Hospital Tab.

The primary & secondary diagnosis default from Patient Registration.
If you wish to change the diagnosis clear the field and type the new code or word and click on the Find button.

SERVICE CODE INFORMATION

Remove	Service Code	Modifier	Type	Alternate Code	Service Description	Alternate Description	Units	Quantity	Amount

SPECIAL INSTRUCTIONS

[   ]

[Add Services] [Submit] [Undo]

There are **no** service codes for SARs associated to inpatient hospitals.

You must manually enter "Number of Days" for SARs with inpatient hospital providers.

13.5 Note the SAR Number for your Records

1. Once the SAR has been submitted for validation, the SAR Number will be reflected when you are taken to the Narrative. Note this number for your records.

13.6 Enter Narrative

1. Enter Narrative text.
2. Click the "Save" button. You will return to the "View SAR" page.

Authorization | Provider | Formulary | Procedure Code | Administration | Reports

FRANCISCO CARLOS CHAVEZ III, 3331366   **PENDING, SAR ID 97000008040**

CLIENT INFORMATION

Client Name:	FRANCISCO CARLOS CHAVEZ III	F/R Elig:	ELIGIBLE	Reg Status:	ACTIVE
CCS Number:	3331366	Med Elig Status:	ELIGIBLE	Application Status:	SIGNED APP
DOB:	02/04/1984	Diagnostic Only:	No	PSA Status:	SIGNED
CIN:	97461633C5	CCS Elig Status:	9N CCS-M/C ONLY	Program Begin Date:	12/18/2002
Gender:	Male	County:	Kings	Program End Date:	12/18/2004

NARRATIVE INFORMATION

Narrative Date:	05/07/2004
General Topic:	Service Authorization #97000008040, Status: Pending
User:	ASHIDA,EMI
Provider:	KAISER FOUNDATION HOSP
Service Period:	05/01/2004 thru 11/20/2004
Provider Type Distribution:	COMMUNITY INPATIENT HOSPITAL

Note the SAR Number

ADDITIONAL INFORMATION

Service Code	Service Description

NARRATIVE TEXT

Enter comments for the SAR here.

Enter Narrative text in this portion of the page.

Step 21   Save   Cancel